

UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 C.F.R. 1.53(b))		Attorney Docket No.	BSI-210US5
		First Inventor	George Goicoechea et al.
		Title	BIFURCATED ENDOLUMINAL PROSTHESIS
		Express Mail Label No.	EV 321471048 us


APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.	8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
3. <input checked="" type="checkbox"/> Specification [Total Pages 68] (preferred arrangement set forth below) - Descriptive title of the invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the invention - Brief Summary of the invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure	a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies), or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 23]	ACCOMPANYING APPLICATIONS PARTS
5. Oath or Declaration [Total Pages 15] a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d)) (for a continuation/divisional with Box 18 completed) i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). c. <input type="checkbox"/> Unexecuted Declaration	9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee) 11. <input type="checkbox"/> English Translation Document (if applicable) 12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations 13. <input checked="" type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	17. <input checked="" type="checkbox"/> Other: <u>Preliminary Amendment includes copy of U.S. Patent No. 6,416,542</u>

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☒ Continuation ☐ Divisional ☐ Continuation-in-part (CIP)
 Prior application information Examiner Milano, M.

of prior application No: 08 / 463,987
 Group / Art Unit: 3308

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS					
<input checked="" type="checkbox"/> Customer Number or Bar Code Label <div style="border: 1px solid black; padding: 5px; text-align: center;">  23122 </div>			or <input type="checkbox"/> Correspondence address below		
(Insert Customer No. or Attach bar code label here)					
Name					
Address	PATENT TRADEMARK OFFICE				
City	State	Zip Code			
Country	Telephone	Fax			

Name (Print/Type)	Joshua L. Cohen	Registration No. (Attorney/Agent)	38,040
Signature	<i>Joshua L. Cohen</i>	Date	July 9, 2003

CERTIFICATE OF MAILING BY "EXPRESS MAIL" (37 CFR 1.10)

Applicant(s): George Goicoechea et al.

Docket No.

BSI-210US5

Serial No.

(to be assigned)

Filing Date

(herewith)

Examiner

Group Art Unit

Invention: BIFURCATED ENDOLUMINAL PROSTHESIS

I hereby certify that the following correspondence:

Utility Patent Application Transmittal; Fee Transmittal (duplicate) w/Check \$750; Preliminary Amendment (8 pgs) w/Abstract (1 pg) and Copy of U.S. Patent No. 6,416,542 (25 pgs); Specification & Claims (68 pgs); Drawings (23 sheets); Copy of Executed Declaration/Power of Attorney from parent appli. serial no. 08/463,987 (15 pgs).

(Identify type of correspondence)

Is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 in an envelope addressed to:

Mail Stop Patent Application

Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

on July 9, 2003

Kathleen Libby*(Typed or Printed Name of Person Mailing Correspondence)*
*(Signature of Person Mailing Correspondence)*EV 321471048 US*("Express Mail" Mailing Label Number)***Note: Each paper must have its own certificate of mailing.**

FEE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 750

Complete if Known

Application Number	(to be assigned)
Filing Date	(herewith)
First Named Inventor	George Goicoechea
Examiner Name	
Art Unit	
Attorney Docket No.	BSI-210US5

METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit Card ☐ Money ☐ Other ☐ None
Order

☒ Deposit Account:

Deposit Account Number: 18-0350

Deposit Account Name: RatnerPrestia

The Commissioner is authorized to: (check all that apply)

☐ Charge fee(s) indicated below
☒ Credit any overpayments.
☒ Charge any additional fee(s) during the pendency of this application
☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1001	750	2001	375	Utility filing fee	750
1002	330	2002	165	Design filing fee	
1003	520	2003	260	Plant filing fee	
1004	750	2004	375	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	
SUBTOTAL (1)					(\$ 750)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	20	-20**	=	0	X	Fee from below	=	0	Fee Paid
Independent Claims	2	-3**	=	0	X		=	0	
Multiple Dependent					X		=	0	

Large Entity		Small Entity		Fee Description
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
1202	18	2202	9	Claims in excess of 20
1201	84	2201	42	Independent claims in excess of 3
1203	280	2203	140	Multiple dependent claim, if not paid
1204	84	2204	42	** Reissue independent claims over original patent
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent
SUBTOTAL (2)				

SUBTOTAL (2) (\$ 0)

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for ex parte reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	
1252	410	2252	205	Extension for reply within second month	
1253	930	2253	465	Extension for reply within third month	
1254	1,450	2254	725	Extension for reply within fourth month	
1255	1,970	2255	985	Extension for reply within fifth month	
1401	320	2401	160	Notice of Appeal	
1402	320	2402	160	Filing a brief in support of an appeal	
1403	280	2403	140	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1,300	2453	650	Petition to revive - unintentional	
1501	1,300	2501	650	Utility issue fee (or reissue)	
1502	470	2502	235	Design issue fee	
1503	630	2503	315	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180	Submission of Information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	750	2809	375	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	750	2810	375	For each additional invention to be examined (37 CFR § 1.129(b))	
1801	750	2801	375	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$ 0)

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Joshua L. Cohen	Registration No. Attorney/Agent	38,040	Telephone	(610) 407-0700
Signature	<i>Joshua L. Cohen</i>		Date	July 9, 2003	

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.